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PTO/SB/81 (07-06)

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INDICATION FORM**

Application Number	10/789,698
Filing Date	2/27/04
First Named Inventor	Carroll, Craig
Title	Retractable Writing Tool
Art Unit	3751
Examiner Name	Walczak, David J.
Attorney Docket Number	Carroll

I hereby revoke all previous powers of attorney given in the above-identified application.

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	12-13-06
Name	Craig Carroll	Telephone	949 715 7750
Title and Company	PRESIDENT C2D INC.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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December 15, 2006

Commissioner for Patents
PO BOX 1450
Alexandria, VA 22313-1450

VIA 1st CLASS MAIL

Re: Patent Application No. 10/789,698 for "Retractable Writing Tool and Self Sealing Valve"

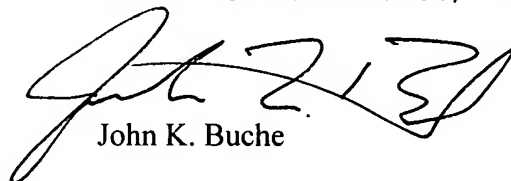
Dear Patent Office:

Please find enclosed the following:

- Power of Attorney and Correspondence Address Indication Form

Sincerely,

Buche & Associates, P.C.:



John K. Buche